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**PATENT APPLICATION FEE DETERMINATION RECORD**  
Substitute for Form PTO-875

Application or Docket Number  
**09/462218**

**CLAIMS AS FILED - PART I**

(Column 1)		(Column 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))				\$150	OR		\$300
TOTAL CLAIMS (37 CFR 1.16(c))	23 minus 20 =	3	x \$25 =		OR	x \$50 =	54
INDEPENDENT CLAIMS (37 CFR 1.16(b))	2 minus 3 =		x \$100 =		OR	x \$200 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ \$180 =		OR	+ \$360 =	
			TOTAL		OR	TOTAL	894

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**CLAIMS AS AMENDED - PART II**

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	34	Minus 34	= 0	x \$25 =		OR	x \$50 =	
Independent (37 CFR 1.16(b))	7	Minus 7	= 0	x \$100 =		OR	x \$200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$180 =		OR	+ \$360 =	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

  

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))		Minus	=	x \$25 =		OR	x \$50 =	
Independent (37 CFR 1.16(b))		Minus	=	x \$100 =		OR	x \$200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$180 =		OR	+ \$360 =	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

  

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))		Minus	=	x \$25 =		OR	x \$50 =	
Independent (37 CFR 1.16(b))		Minus	=	x \$100 =		OR	x \$200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$180 =		OR	+ \$360 =	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD  
 (Revised November 15, 1979)

Application or Serial Number  
**09/462218**

CLAIMS AS FILED - PART I

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	23	3
DEPENDENT CLAIMS	2	
MULTIPLE DEPENDENT CLAIM FEE		

SMALL ENTITY TYPE <input type="checkbox"/> OR		OTHER THAN SMALL ENTITY	
RATE	FEE	RATE	FEE
	OR		OR
150-		150-	
250-		250-	
350-		350-	
450-		450-	
TOTAL		TOTAL	840

\* If the difference between column 1 and column 2, enter "Y" in column 3.  
 \*\* If the difference between column 1 and column 2, enter "N" in column 3.

*11/2/84*

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	25	3
DEPENDENT CLAIMS	5	
MULTIPLE DEPENDENT CLAIM FEE		

SMALL ENTITY TYPE <input type="checkbox"/> OR		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	OR		OR
150-		150-	
250-		250-	
350-		350-	
450-		450-	
TOTAL		TOTAL	1720

*1-7-85*

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	34	9
DEPENDENT CLAIMS	7	
MULTIPLE DEPENDENT CLAIM FEE		

SMALL ENTITY TYPE <input type="checkbox"/> OR		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	OR		OR
150-		150-	
250-		250-	
350-		350-	
450-		450-	
TOTAL		TOTAL	430

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FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	34	9
DEPENDENT CLAIMS	7	
MULTIPLE DEPENDENT CLAIM FEE		

SMALL ENTITY TYPE <input type="checkbox"/> OR		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	OR		OR
150-		150-	
250-		250-	
350-		350-	
450-		450-	
TOTAL		TOTAL	

\* If the difference between column 1 and column 2, enter "Y" in column 3.  
 \*\* If the difference between column 1 and column 2, enter "N" in column 3.